

jc979 U.S. PTO
02/27/02

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Approved for use through 10/31/2002. OMB 0651-0032

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UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.	01/036 MFE
First Inventor	Ursula MURSCHALL
Title	"White, biaxially oriented film..
Express Mail Label No.	ET 929454682 US

Jc971 U.S. PTO
02/27/02

APPLICATION ELEMENTS		ADDRESS TO:
See MPEP chapter 600 concerning utility patent application contents.		Assistant Commissioner for Patents Box Patent Application Washington, DC 20231
<p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <i>(Submit an original and a duplicate for fee processing)</i></p> <p>2. <input type="checkbox"/> Applicant claims small entity status. <i>See 37 CFR 1.27.</i></p> <p>3. <input checked="" type="checkbox"/> Specification [Total Pages 33] <i>(preferred arrangement set forth below)</i> <ul style="list-style-type: none"> - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (<i>if filed</i>) - Detailed Description - Claim(s) - Abstract of the Disclosure </p> <p>4. <input type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 2]</p> <p>5. Oath or Declaration [Total Pages 2] a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63 (d)) <i>(for continuation/divisional with Box 18 completed)</i> <ul style="list-style-type: none"> i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). </p> <p>6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76</p>		<p>7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (<i>Appendix</i>)</p> <p>8. Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i></p> <p>a. <input type="checkbox"/> Computer Readable Form (CRF)</p> <p>b. Specification Sequence Listing on: <ul style="list-style-type: none"> i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper </p> <p>c. <input type="checkbox"/> Statements verifying identity of above copies</p>
ACCOMPANYING APPLICATION PARTS		
<p>9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s))</p> <p>10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney <i>(when there is an assignee)</i></p> <p>11. <input type="checkbox"/> English Translation Document (<i>if applicable</i>)</p> <p>12. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations</p> <p>13. <input type="checkbox"/> Preliminary Amendment</p> <p>14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i></p> <p>15. <input checked="" type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i></p> <p>16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.</p> <p>17. <input checked="" type="checkbox"/> Other: Limited Recognition form</p>		

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

Continuation Divisional Continuation-in-part (CIP) of prior application No.: _____ / _____

Prior application information: Examiner: _____ Group Art Unit: _____

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

<input type="checkbox"/> Customer Number or Bar Code Label	(Insert Customer No. or Attach bar code/label here)		<input type="checkbox"/> or <input checked="" type="checkbox"/> Correspondence address below
Name	ProPat, L.L.C.		
Address	2912 Crosby Road		
City	Charlotte	State	NC
Country	USA	Telephone	704 365-4881
Name (Print/Type)	Klaus Schweitzer	Registration No. (Attorney/Agent)	Limited Recognition
Signature	<i>Klaus Schweitzer</i>		Date Feb. 27, 2002

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FEE TRANSMITTAL

for FY 2002

Patent fees are subject to annual revision. Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 780.00)

Complete If Known

Application Number	
Filing Date	
First Named Inventor	Ursula MURSCHALL
Examiner Name	
Group Art Unit	
Attorney Docket No.	01/036 MFE

METHOD OF PAYMENT (check all that apply)

Check Credit card Money Order Other None

Deposit Account:

Deposit Account Number	
Deposit Account Name	

The Commissioner is authorized to: (check all that apply)

Charge fee(s) indicated below Credit any overpayments

Charge any additional fee(s) during the pendency of this application

Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION**1. BASIC FILING FEE**

Large Entity	Fee Code (\$)	Fee	Small Entity	Fee Code (\$)	Fee	Fee Description	Fee Paid
	101	740		201	370	Utility filing fee	740
	106	330		206	165	Design filing fee	
	107	510		207	255	Plant filing fee	
	108	740		208	370	Reissue filing fee	
	114	160		214	80	Provisional filing fee	

SUBTOTAL (1) (\$ 740.00)

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	Independent Claims	Multiple Dependent	Extra Claims	Fee from below	Fee Paid
	18	-20** = 0	X	= 0	
	2	-3** = 0	X	= 0	

Large Entity	Small Entity	Fee Description	
	103	18	Claims in excess of 20
	102	84	Independent claims in excess of 3
	104	280	Multiple dependent claim, if not paid
	109	84	** Reissue independent claims over original patent
	110	18	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$ 0)

**or number previously paid, if greater; For Reissues, see above

3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Code (\$)	Fee (\$)	Fee Description	Fee Paid
		105	130	205 65 Surcharge - late filing fee or oath	
		127	50	227 25 Surcharge - late provisional filing fee or cover sheet	
		139	130	139 130 Non-English specification	
		147	2,520	147 2,520 For filing a request for <i>ex parte</i> reexamination	
		112	920*	112 920* Requesting publication of SIR prior to Examiner action	
		113	1,840*	113 1,840* Requesting publication of SIR after Examiner action	
		115	110	215 55 Extension for reply within first month	
		116	400	216 200 Extension for reply within second month	
		117	920	217 460 Extension for reply within third month	
		118	1,440	218 720 Extension for reply within fourth month	
		128	1,960	228 980 Extension for reply within fifth month	
		119	320	219 160 Notice of Appeal	
		120	320	220 160 Filing a brief in support of an appeal	
		121	280	221 140 Request for oral hearing	
		138	1,510	138 1,510 Petition to institute a public use proceeding	
		140	110	240 55 Petition to revive - unavoidable	
		141	1,280	241 640 Petition to revive - unintentional	
		142	1,280	242 640 Utility issue fee (or reissue)	
		143	460	243 230 Design issue fee	
		144	620	244 310 Plant issue fee	
		122	130	122 130 Petitions to the Commissioner	
		123	50	123 50 Processing fee under 37 CFR 1.17(q)	
		126	180	126 180 Submission of Information Disclosure Stmt	
		581	40	581 40 Recording each patent assignment per property (times number of properties)	40.00
		146	740	246 370 Filing a submission after final rejection (37 CFR § 1.129(a))	
		149	740	249 370 For each additional invention to be examined (37 CFR § 1.129(b))	
		179	740	279 370 Request for Continued Examination (RCE)	
		169	900	169 900 Request for expedited examination of a design application	

Other fee (specify) _____

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$ 40.00)

SUBMITTED BY

Name (Print/Type)	Klaus Schweitzer	Registration No. (Attorney/Agent)	Lim. Recog.	Telephone	704 365-4881
Signature	<i>K. Schweizer</i>				Date Feb. 27, 2002

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